



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: PRICE ET AL.

Serial No.: 09/916,116

Filed: July 26, 2002

For: COMPRESSIBLE FOAM TAPES AND  
METHOD OF MANUFACTURE  
THEREOF

)  
) Group Art Unit: 1771  
)  
)  
)  
) Examiner: Victor S. Chang  
)  
)  
)

*Handwritten notes and signatures:*  
4/18/03  
2-12-03  
[Signature]

AMENDMENT

**RECEIVED**  
FEB 05 2003  
TC 1700

Box Non-Fee Amendment  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

This amendment is submitted in response to the Office Action dated October 25,  
2002. Please amend the above-referenced Application as follows to place the case in  
condition for allowance.

I hereby certify that this correspondence was deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Non-Fee Amendment, Commissioner for Patents, Washington, D.C. 20231 on	
January 27, 2003 (Date of Deposit)	
Patricia A. Hart (Name of Person Mailing Paper)	
<i>[Signature]</i> Signature	01/27/03 Date

**AMENDMENT TRANSMITTAL LETTER (Large Entity)**Applicant(s): **PRICE ET AL.**

Docket No.

**RGP-0062**

Serial No.

**09/916,116**

Filing Date

**07/26/2001**

Examiner

**VICTOR S. CHANG**

Group Art Unit

**1771**

Invention:

**COMPRESSIBLE FOAM TAPES AND METHOD OF MANUFACTURE THEREOF****FEB 03 2003****RECEIVED****FEB 05 2003****TC 1700**TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	33 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	5 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **06-1130**  
A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: **January 27, 2003**

Signature

**Leah M. Reimer**  
**Registration No.: 39,341**  
**Customer No.: 23413**

I certify that this document and fee is being deposited  
on **01/27/2003** with the U.S. Postal Service as  
first class mail under 37 C.F.R. 1.8 and is addressed to the  
Assistant Commissioner for Patents, Washington, D.C.  
20231.

Signature of Person Mailing Correspondence

**Patricia A. Hart**

Typed or Printed Name of Person Mailing Correspondence

cc: